

Texas Board of Occupational Therapy Examiners

333 Guadalupe, Ste# 2-510 Austin, Texas 78701-3942 512/305-6900 • 512/305-6951 fax http://www.ecptote.state.tx.us

The Board office must receive this form before your temporary license can be issued.

As a condition for receiving a temporary license, the applicant must submit evidence of supervision. It is incumbent on the applicant or temporary licensee to keep this form current. Notify us immediately with a change of jobs/supervisor.

Part I. To be completed by the applicant:

I certify that I will work under the supervision of an Occupational Therapist licensed to practice in Texas in accordance with the TBOTE rules.

Print name:	
Signature:	
Date:	
Part 2. To be completed by supervising OTR: I certify that I will provide supervision to the aborules, should this person accepts my job offer.	ve-named individual, in accordance with the TBOTE
Printed name:	
Signature of Supervising OTR:	
Primary place of employment:	
Address:	
City, State, Zip:	
License #:	Expiration date:
Date:	_

for staff use only			
Receipt Date:	Reviewed by:	Temp License # when issued:	